

# Holly Hill House

Report ID: CCN 195431  
Generated: 2026-07-23T19:06:28.865Z

## § 1 Facility Identity

|                |                                       |
|----------------|---------------------------------------|
| Facility       | Holly Hill House                      |
| CCN            | 195431                                |
| Location       | 100 Kingston Road, Sulphur, LA, 70663 |
| Ownership type | For profit - Corporation              |
| Certified beds | 200                                   |

## § 2 CMS Federal Record

|                                            |                                              |
|--------------------------------------------|----------------------------------------------|
| Civil money penalties on file              | \$71,839                                     |
| Deficiency citations — current cycle       | 18 ( 50% vs prior 24 months (12))            |
| Deficiency citations — prior 24 months     | 12                                           |
| Immediate Jeopardy — current cycle         | 0                                            |
| Actual-harm (G+) citations — current cycle | 1                                            |
| Special Focus Facility status              | Not listed                                   |
| Abuse icon                                 | <b>Yes — CMS abuse icon currently listed</b> |

## § 3 Federal Penalties in Context

|                                   |                                                       |
|-----------------------------------|-------------------------------------------------------|
| This facility — penalties on file | \$71,839                                              |
| LA state average                  | \$49,913 (this facility is 1.4× the LA average)       |
| National average                  | \$31,239 (this facility is 2.3× the national average) |

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

## § 4 Current-Cycle Deficiencies

The current survey cycle records the following 18 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

| F-TAG | FINDING (CMS)                                                                                                                                                                      | SCOPE/SEV. | SOURCE          |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------|
| F656  | Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.                                                  | G          | Complaint       |
| F727  | Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.                                                    | F          | Standard survey |
| F865  | Have a plan that describes the process for conducting QAPI and QAA activities.                                                                                                     | F          | Standard survey |
| F695  | Provide safe and appropriate respiratory care for a resident when needed.                                                                                                          | E          | Standard survey |
| F756  | Ensure a licensed pharmacist perform a monthly drug regimen review, including the medical chart, following irregularity reporting guidelines in developed policies and procedures. | E          | Standard survey |
| F812  | Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.                             | E          | Standard survey |
| F600  | Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.                                                 | D          | Complaint       |
| F609  | Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.                                                                | D          | Complaint       |
| F610  | Respond appropriately to all alleged violations.                                                                                                                                   | D          | Complaint       |
| F628  | Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.                                                           | D          | Complaint       |
| F656  | Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.                                                  | D          | Complaint       |
| F550  | Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.                                                         | D          | Standard survey |

|      |                                                                                                                                                                                                                                                         |   |                 |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----------------|
| F584 | Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.                                                                               | D | Standard survey |
| F644 | Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.                                                                                                                              | D | Standard survey |
| F656 | Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.                                                                                                                       | D | Standard survey |
| F755 | Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.                                                                                                                          | D | Standard survey |
| F761 | Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs. | D | Standard survey |
| F803 | Ensure menus must meet the nutritional needs of residents, be prepared in advance, be followed, be updated, be reviewed by dietician, and meet the needs of the resident.                                                                               | D | Standard survey |

## § 5 Ownership

|                  |                                               |
|------------------|-----------------------------------------------|
| Ownership record | Owner on file: GERIATRICS, LLC (organization) |
|------------------|-----------------------------------------------|

## § 6 CMS Care Compare Star Ratings

|                       |                                    |
|-----------------------|------------------------------------|
| Overall               | 1 / 5 (state avg 2.5 · US avg 3)   |
| Health inspection     | 1 / 5 (state avg 2.9 · US avg 2.8) |
| Staffing              | 1 / 5 (state avg 2.4 · US avg 2.9) |
| Quality measures (QM) | 2 / 5 (state avg 2.2 · US avg 3.7) |

## § 7 Record Provenance

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|                          |                                                                                                                                                   |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| CMS data as of           | Jun 2026                                                                                                                                          |
| Independent verification | <a href="https://www.medicare.gov/care-compare/details/nursing-home/195431">https://www.medicare.gov/care-compare/details/nursing-home/195431</a> |
| Snapshot SHA-256         | 3fa175caa40c1f570d90be8398b3dc7a9d32e4cea574d594c85f14fd8b65dcb2                                                                                  |
| Methodology & version    | v1.0 — <a href="https://www.caregiverhelpnow.com/methodology">https://www.caregiverhelpnow.com/methodology</a>                                    |

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## § 8 For Your Attorney

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1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
  2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 195431.
  3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 3fa175caa40c.
  4. Deficiency F-tags cited above are searchable in CMS QCOR ([qcor.cms.gov](https://qcor.cms.gov)).
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This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at <https://www.caregiverhelpnow.com/methodology>; the Snapshot SHA-256 above pins this record to that methodology version.

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